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REVIEW OF ACTIVITIES OF THE UNITED NATIONS SYSTEM RELATING TO INDIGENOUS PEOPLES: AN INTERACTIVE DISCUSSION

Information received from the United Nations system

THE WORK OF THE UNITED NATIONS POPULATION FUND (UNFPA) IN SUPPORT OF INDIGENOUS PEOPLES

Introduction

1. Reports indicate that the standard of health care, including reproductive health care and related information, available to indigenous peoples is often inferior to that of the general population. Infant mortality and maternal morbidity and mortality rates are, in most countries, higher for indigenous peoples than the national average and their life expectancy is consequently lower. Adequate health care is often not delivered to indigenous peoples due to a lack of information and health-care services that are culture and language specific to them.

2. The Programme of Action of the International Conference on Population and Development (ICPD), approved by consensus among 179 countries, marked the beginning of a new era in population and development. The landmark agreement broke new ground in the commitments to raise the quality of life and improve the welfare of all human beings. The Programme of Action recognizes that the problems faced by indigenous peoples in such areas as human rights, the environment and health are directly related to the purpose of the ICPD and, as such, the distinctive perspective of indigenous peoples is reflected in all aspects of the Programme of Action. The need to promote and respect the rights of indigenous peoples, among

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others, was again stressed at the five-year review of ICPD in 1999, which also reiterated the importance of developing health services and programmes for indigenous peoples, with their full participation.

3. At the Millennium Summit, world leaders agreed, "to take measures to eliminate the increasing acts of racism and xenophobia in many societies, and to promote greater harmony and tolerance in all societies". In support of these international agreements, UNFPA's work is guided by the principles of human rights and is fully committed to the goals of the World Conference against Racism, Racial Discrimination, Xenophobia and Related Intolerance, which include the betterment of the life of indigenous peoples. UNFPA therefore fully participated in the International Day of the World's Indigenous People on 9 August 2000, as well as in the preparatory consultations for the World Conference held on 10 August 2000 which resulted in a draft declaration by indigenous peoples for discussion at the World Conference against Racism.

4. As a matter of importance, UNFPA has appointed a focal point for indigenous peoples and UNFPA's regional Country Technical Services Teams (CSTs) include socio-cultural advisers who ensure that programmes are developed and implemented taking into account the perspective of indigenous peoples and other minorities. In addition, there are focal points for indigenous peoples in several of UNFPA's Country Offices.

UNFPA's activities in support of indigenous peoples

5. UNFPA has been supporting initiatives and programmes to address the special needs of indigenous peoples through developing quality, culturally sensitive reproductive health information and education programmes and services that respond to the needs of indigenous peoples, with their full participation. More specifically, UNFPA funds national and regional projects responding specifically to the needs of indigenous peoples, in particular in Latin America and the Caribbean region. These projects focus on improving access of indigenous peoples to primary health-care centres and to improving the quality of the reproductive health care received. The projects take into account the importance of cultural values for quality of care and include training and counselling components for health workers, as well as the provision of reproductive health equipment and contraceptives.

6. UNFPA has been funding reproductive health-related programmes for indigenous peoples since the early 1990s, and efforts have increased through the provision of bi-literacy programmes. These programmes, which involve providing literacy training in both the native language of the participants and Spanish - the official language of the country - are also excellent vehicles for transmitting information on reproductive health and gender issues to mostly illiterate indigenous peoples as well as to non-indigenous communities, including community leaders, policy makers, social and health workers and the media. UNFPA has been supporting such programmes in Bolivia, Guatemala, Mexico and Peru. UNFPA has also funded the production of a prize-winning documentary film on the bi-literacy programme in Peru, called *Así es esta historia*.

7. Regional activities include organization of a seminar on reproductive health for indigenous women held in Pucallpa, Peru, in June of 1998, as well as support for a number of socio-demographic studies in the Andean region.

The way forward

8. UNFPA will continue to participate in system-wide efforts, such as that regarding the creation of a forum for indigenous peoples, and consult with partners of the United Nations Development Group on further possible contributions. As to future activities, UNFPA has initiated work on the development of an African map of indigenous peoples. Such a map will show the location of the indigenous peoples and provide basic information (name, numbers and other characteristics) about them. If successful, a similar map will be developed for other regions, which will lead to a world map. These maps would facilitate the coverage of indigenous peoples in data collection activities, which is not currently the case. With a view to improving the living conditions and health status of the indigenous peoples, UNFPA would like to make the following recommendations. There is a need:

(a) To develop comprehensive and accessible health services and programmes, including reproductive health, for indigenous communities with their full participation. These programmes would respond to the needs and reflect the rights of indigenous peoples, with particular consideration to their cultures and languages;

(b) To place a gender perspective at the centre of all policies and programmes affecting women's health, in particular indigenous women, and involve them in the planning, implementation and monitoring of such policies and programmes, and in the provision of health services;

(c) To create permanent national and local working groups that include government officials, NGOs, women's groups and indigenous peoples to ensure that reproductive rights are explicitly covered in policies and laws;

(d) For Governments, in collaboration with research institutions and NGOs, as well as with the assistance of the international community, to strengthen national information systems to produce reliable statistics on a broad range of population and environment-related issues and to develop indicators in a timely manner. The indicators should include, inter alia, poverty measures at the community level, women's access to social and economic resources, enrolment and retention of girls and boys in schools, and access to reproductive health services. All of the information should be disaggregated by population subgroups, including indigenous peoples, age and sex, which are crucial for translating policy into strategies that address age and gender concerns and for developing appropriate indicators for monitoring progress;

(e) To develop youth and adult education programmes with a focus on issues relating to indigenous peoples.